Medication Exposure During Pregnancy and Lactation

WHAT IS THE PUBLIC HEALTH ISSUE?

The use of a number of medications (Thalidomide, Accutane®) during pregnancy has been associated with serious birth defects. Because pregnant and lactating women are traditionally excluded from clinical trials and because premarketing animal studies do not necessarily predict the experience of humans, little information is known about the safety of most medications during pregnancy and lactation at the time they are marketed. Half of pregnancies in the United States each year are unintended, so that many women may inadvertently use medications early in gestation before realizing they are pregnant. These include prescription and over-the-counter drugs, dietary supplements, and herbal preparations, which may have physiologic effects. In addition, many maternal conditions (e.g., asthma, epilepsy) require treatment during pregnancy to ensure the health of both mother and infant. Also, unexpected events may arise in which unanticipated medication exposures occur (e.g., prophylaxis for potential anthrax exposure).

These facts highlight the need for a more comprehensive and coordinated public health approach to generating and interpreting information about the effects of medication use during pregnancy and lactation, making that information readily available to women and health care providers, and translating that information into safe and effective health care for pregnant and lactating women and their children.

WHAT HAS CDC ACCOMPLISHED?

- Hosted a meeting of external partners to discuss a coordinated public health approach to medications in pregnancy and lactation in March, 2004.
- Published articles including an analysis of the relationship between hypospadias and Claritin® exposure during pregnancy, and a manuscript on ensuring the safe use of known teratogens.
- Co-chaired a workshop through the Drug Information Association entitled “Pregnancy Exposure Registries: Evaluating the Teratogenic Potential of Pharmaceutical Products used at Clinical Doses” in May, 2004.
- Analyzed data from the National Birth Defects Prevention Study on the use of nonprescription and herbal medications among mothers of control infants.
- Provided scientific expertise to advisory committees of pharmaceutical industry-based pregnancy registries and the Food and Drug Administration on monitoring medications during pregnancy.

WHAT ARE THE NEXT STEPS?

- Survey obstetricians about what is needed to improve their ability to counsel patients about the effects of medications during pregnancy and lactation.
- Analyze data on knowledge, attitudes, and behaviors among adolescent girls about medication sharing.
- Co-chair a second workshop through the Drug Information Association on the conduct of pregnancy exposure registries to monitor medications used in pregnancy.
- Develop a plan to systematically monitor the relationship of medication exposures and pregnancy outcomes using data from the National Birth Defects Prevention Study.
- Further develop a coordinated public health approach to address medication exposures in pregnancy and lactation.